SEP 9 2016

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION IX – PACIFIC SOUTHWEST REGION
75 Hawthorne Street
San Francisco, CA 94105-3901

VIA CERTIFIED MAIL
No. 7016 1370 0000 2235 2029
RETURN RECEIPT REQUESTED

Aaron Poentis
Environmental Program Director
Department of the Navy
Navy Region Hawaii
850 Ticonderoga Street, Suite 110
Joint Base Pearl Harbor-Hickam, Hawaii 96860-5101

RE: Request for Information under Clean Water Act Section 308(a) – Joint Base Pearl Harbor-Hickam, EPA Docket No. CWA 308-9-16-014

Dear Mr. Poentis:

The U.S. Environmental Protection Agency, Region IX ("EPA") is evaluating the U.S. Department of the Navy, Joint Base Pearl Harbor-Hickam's ("JBPHH") management, operations and maintenance of its sanitary sewage collection system in order to determine compliance with the Clean Water Act ("Act"). This includes all flow tributary to JBPHH's wastewater treatment plants, and any sewage transmitted to any other municipality for treatment and disposal. Pursuant to EPA's information-gathering authority under Section 308 of the Act, 33 U.S.C. § 1318, EPA hereby requests that JBPHH fill out the form in the attached Request for Information **by October 14, 2016**. Please read the instructions and questions in the attachment carefully before preparing your response.

Please send your response by email to:

Fatima Ty
U.S. Environmental Protection Agency, Region IX
Enforcement Division
75 Hawthorne Street (ENF 3-1)
San Francisco, CA 94105
ty.fatima@epa.gov

All submittals in response to this letter must be accompanied by the following certification signed by a responsible officer in accordance with 40 C.F.R. § 122.22:

> "I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified persons properly gather and evaluate the

information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

JBPHH may not withhold from EPA any information on the grounds that it is confidential business information. However, EPA has promulgated, under 40 C.F.R. Part 2, Subpart B, regulations to protect confidential business information it receives. A legally supportable claim of business confidentiality may be asserted in the manner specified by 40 C.F.R. § 2.203(b) for all or part of the information requested by EPA. EPA will disclose business information covered by such claim only as authorized by 40 C.F.R. Part 2, Subpart B. If no claim of confidentiality accompanies the information at the time EPA receives it, EPA may make it available to the public without further notice.

Failure to comply with this Request for Information can result in enforcement action for appropriate remedy, including penalties, under Section 309 of the CWA, 33 U.S.C. § 1319. Compliance with this Request for Information does not relieve JBPHH of its obligation to comply with the CWA or other applicable laws and permits.

The Request for Information is not subject to review by the Office of Management and Budget under the Paperwork Reduction Act because it is directed to fewer than ten persons and is therefore not a "collection of information" under 44 U.S.C. § 3502(3). It is also an exempt activity under 44 U.S.C. § 3518(c) and 5 C.F.R. § 1320.4.

Thank you for your cooperation and prompt attention to this letter as it is a matter of public health and protection of vital environmental resources. If you have any questions regarding this Request for Information, please contact Fatima Ty at 415-972-3550 or ty.fatima@epa.gov or Ken Greenberg at 415-972-3577 or greenberg.ken@epa.gov.

Sincerely,

Thanne Berg
Acting Assistant Director, Water & Pesticides Branch
Enforcement Division

Enclosure

cc (via email): Matt Kurano, Hawaii Department of Health

ATTACHMENT

Instructions

1. Best Information Available. Respond to the best of your ability. If you do not know the answer to a question, state that in the area provided for the response. Identify any responses that are approximations and provide further explanation to any of these qualified responses, as appropriate.

2. Obligation to Correct. If you later discover that any submitted information is incorrect, submit a corrected response as soon as possible.

3. Use of Document in Place of Answer. If a document provides the complete answer to a question, you may use it in place of a written response by supplying the document and identifying the applicable portion of the document that answers question.

4. Electronic Documentation. When requested to provide an electronic copy of a document, email the document to Fatima Ty at ty.fatima@epa.gov by the due date of this information request.

Definitions

The following terms shall have the following definitions for this Information Request:

1. "Collection System" means all parts of the wastewater collection system owned or operated by the Utility that are intended to convey domestic or industrial wastewater for treatment and disposal, including wastewater treatment plants owned or operated by the Utility. This includes sewer mains, pipes, pump stations, lift stations, maintenance holes, force mains, siphons and appurtenances to each of the above.

2. "Sanitary Sewer Overflow" or "SSO" means any overflow, spill, or release of wastewater from the Collection System.

3. "Utility" means the U.S. Department of the Navy, Joint Base Pearl Harbor-Hickam ("JBPHH"), which owns or operates the Collection System that conveys wastewater for the NAVFAC Hawaii Wastewater Treatment Plant (HI0110086).

4. "You" means the Utility.

REQUEST FOR INFORMATION

General Information

Utility Name:		
Address:		
Contact Person:		
Phone:	Cell:	Fax:
Email:		

System Overview

1. Population: _____
2. Service area (Sqr. Miles): _____
3. Cities included in service area: _____
4. Number of service connections:

Residential	Commercial	Industrial	Total

5. Combined sewers (% of system): _____
6. Name and NPDES permit number for Wastewater Treatment Plant(s) ("WWTP") owned or operated by the Utility that are not included in the definition of Utility:
   _____
   _____
   _____
   _____
7. Name and NPDES permit number for WWTP(s) that receive flow from the Collection System:
   _____
   _____
   _____
   _____
8. Names of upstream collection systems sending flow to the Collection System:
   _____
   _____
   _____

9. Names of downstream collection systems receiving flow from the Collection System:

   _____

   _____

   _____

10. Do any interagency agreements exist with upstream collection systems? (Y/N) ____

11. Does the Utility maintain the legal authority to limit flow from upstream satellite collection systems? (Y/N) ____

System Inventory (list only assets owned by Utility)

12. List Collection System inventory in the following table:

Miles of gravity main	Miles of force main	Miles of Laterals	Number of maintenance access structures	Number of pump stations	Number of siphons

13. Is the Utility responsible for laterals? (Y/N)_____

14. If the Utility is responsible for laterals, describe the portion of the lateral which is the Utility's responsibility? (whole, lower, etc.)_____

15. List the size of Collection System main in the following table:

Diameter in inches	Gravity Sewer (miles)	Force Mains (miles)
6 inches or less		
8 inches		
9 - 18 inches		
19 - 36 inches		
36 inches or greater		

16. List the age of Collection System main in the following table:

Age	Sewer Mains (miles)	# of Pump Stations
25 years or less		
26 - 50 years		
51 - 75 years		
76 years or greater		

Collection System Flow Characteristics

17. List the Collection System flow rates in the following table:

Average Daily Dry Weather Flow (MGD)	Peak Daily Wet Weather Flow (MGD)	Peak Instantaneous Wet Weather Flow (MGD)

18. Location of flow monitor(s) from which above information obtained: _____

19. Period of time over which flow was monitored: _____

20. If flow monitors are not used, describe how flow is estimated:
_____

21. List the WWTP flow rates in the following table:

WWTP Name	Average Daily Dry Weather Flow (MGD)	Peak Daily Wet Weather Flow (MGD)	Peak Instantaneous Wet Weather Flow (MGD)

22. List satellite systems that flow to the WWTPs and associated flow rates in the following table:

Satellite Name	Avg. Dry Weather Flow		Peak Flow (MGD)	Flow based on meter or estimate?
	(MGD)	% of total flow		

23. List relief points and discharge frequency in the following table:

Relief Point	Location	Number of Discharges/Year

Regulatory Background

24. Does the Collection System operate under the provisions of an NPDES permit (either their own or under provisions of another agency's permit)? (Y/N)____

    Permit holder _____ Permit # _____

25. Does the Collection System operate under a state permit? (Y/N)____

26. Are there any reporting requirements for spills from the Collection System? (Y/N)____

27. If there are requirements for reporting spills, which agency (or agencies) promulgates the spill reporting requirements? _____

28. Outline the spill reporting requirements (summarize spill reporting requirement for each applicable statute, regulation and permit), or alternatively, provide an electronic copy of each applicable statute, regulation, and/or permit:

    _____
    _____
    _____
    _____

Spills

29. List all Sanitary Sewer Overflows (SSOs) from the Collection System in the following table:

Sanitary Sewer Overflows From or Caused by Collection Sytem						
Calendar Year	Mains (Miles of Mains ____)		Laterals (Miles of Laterals ____)		Total (Total Miles____)	
	#SSOs	Gross Spill Volume (gallons)	#SSOs	Gross Spill Volume (gallons)	Total SSOs	Total Gross Spill Volume (gallons)
2011						
2012						
2013						
2014						
2015						
2016 (thru 9/1)						
Total						

30. List all causes of Sanitary Sewer Overflows in the following table:

Calendar Year	Blockage								Gravity Pipe Break		Force Main Break		Pump Station		Capacity	
	Grease		Roots		Debris		Multiple									
	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%
2011																
2012																
2013																
2014																
2015																
2016 (thru 9/1)																
Total																

31. Provide an electronic document of facility spill records for the time period of January 1, 2011 to September 1, 2016. Provide the following information for each spill:

    a. Location of spill (street address and city)
    b. Date of spill
    c. Time spill reported
    d. Time spill started
    e. Time spill stopped
    f. Appearance point of spill (private lateral, public sewer main, other, etc.)
    g. Final destination of the spill (surface water, storm drain, sanitary sewer, other, etc.)
    h. Estimated volume of the spill in gallons
    i. Estimated volume of spill recovered in gallons
    j. Estimated volume of spill that reached a surface water in gallons
    k. Cause of the spill (Grease, Roots, Debris, Other)
    l. Location of health warnings posted

    The preferable electronic format for submitting this information is a table, as shown here:

Location of spill (street address and city)	Date of spill	Time spill reported	Time spill started	Time spill stopped	Appearance point of spill	Final destination of spill	Estimated volume of spill (gallons)	Estimated volume of spill recovered (gallons)	Estimated volume of spill to surface water (gallons)	Cause of spill	Location of health warnings posted

32. List building backups caused by problems in the Collection System in the following table:

BUILDING BACKUPS (list only backups caused by problems in sewer mains)		
Year	Number of backups	Cost of Settled Claims
TOTAL		

Staffing and Financial Information

33. Indicate number of staff positions[1] dedicated to Collection System responsibilities in the following table:

Responsibility	Budgeted Positions (FTE)	Positions Filled (FTE)
Management and Administration		
Maintenance		
Electrical and Mechanical		
Engineering		
Other (explain):		

34. Number of certified collection system operators/certification program[1] (FTE):_____

35. Number of sewer cleaning crews: _____

36. Sewer cleaning crew size[1] (FTE): _____

37. Are any services related to the Collection System provided by contractors? (Y/N) ____ If yes, describe the services provided. _____

38. Provide the total annual revenue and the total annual expenditures, such as operations and maintenance and capital improvement projects, for the Collection System in the past 2 years. _____

[1] Use a numerical full time equivalent (FTE) to indicate the number of staff positions. For example, one person working 40 hours per week for 52 weeks per year that is dedicated to Collection System responsibilities 50% of the time and stormwater responsibilities 50% of the time is equal to 0.5 FTE.

Equipment and Financial Information

39. Provide details of major equipment owned by the Utility in the following table:

Equipment	Number Owned	Number in Service
Combination Trucks (hydroflush and vactor)		
Hydroflusher		
Mechanical Rodder		
CCTV Truck		
Utility Truck		
Portable Pumps		
Portable Generator		
Other:		

Spill Response, Notification, and Reporting

40. Does the Utility have a written spill response plan? (Y/N) _____ If it does, provide an electronic copy of the document.

41. If the Utility has a spill response plan, list the elements included in the plan in the following table:

Element	Y/N	Comment
Identification of Responsible Staff		
DISPATCH		
System for Becoming Aware of Spills		
System for Receiving Public Calls		
Dispatch Procedures – Normal Hours		
Dispatch Procedures – After Hours		
Coordination with First Responders (police, fire department)		
Response Time Goal		
SPILL CONTROL/MITIGATION		
Spill Response Activity Sequence		
Spill Site Security		
Procedures for Stopping Spills		
Spill Containment		
Protection of Storm Drains		
Cleanup/Mitigation		
DOCUMENTATION		
Spill Volume Estimation Method (list method in comment field)		
Spill Start Time Determination		
Spill Sampling		
Receiving Water Sampling		
Photographing Spill Site		
Field Notes		
Spill Report		
NOTIFICATION		
Notification of Affected Public (schools, recreational users, etc.)		
Posting Warning Signs		
Sanitation Information regarding building backups		
REPORTING		
Reporting Procedures		
Spill Report Forms		
Persons Responsible for Filing Reports		

42. Are all spills reported regardless of volume? _____

43. Are contractors required to follow spill response procedures? (Y/N) _____

44. Do you know the average spill response time during normal work hours? (Y/N) ____ If yes, what is it? _____ hours

45. Do you know the average spill response time during after-hours and holidays? (Y/N) ____
If yes, what is it? _____ hours

46. Does the Utility CCTV sewer main following a spill? (Y/N) _____

Sewer Cleaning and Maintenance

47. Does the Utility have detailed sewer system maps? (Y/N) _____

48. Are maps available to maintenance crews? (Y/N) _____

49. Maintenance management system is (check all applicable):
    Written _____
    Computerized _____
    Other (describe) _____

50. List annual sewer cleaning work (hydroflushing, mechanical, and hand rodding) completed in the following table:

Annual Sewer Cleaning			
	Unique Pipe Cleaned (exclude repeats)		Total Pipe Cleaned (include repeats)
	(miles)	% of system	(miles)
2012			
2013			
2014			
2015			

51. System cleaning frequency (years to clean entire system): _____

52. Types of problems subject to hot spot cleaning? _____

53. List information about hot spots, locations that are cleaned the most frequently, in the following table:

Hot Spot Cleaning Schedule			
Cleaning Frequency	Number of Locations	Pipe length excluding repeats (miles)	Pipe length including repeats (miles)
1/month			
6/year			
4/year			
2/year			
1/year			

54. Length of pipe subject to chemical root treatments (miles/year): _____

55. How many complaints about odors from the Collection System are received each year?
    _____

56. List out all locations that have received more than one odor compliant in a year:

_____

_____

_____

57. What is the total length of easement pipes (miles)? _____

58. What is the total length of easement pipes cleaned (miles/year)? _____

59. Do maintenance workers have access to all easement pipes? _____

Fats, Oil, and Grease (FOG) Program

60. Does the Utility have a FOG source control ordinance? _____

61. Ordinance citation: _____

62. Agency/department responsible for implementing the FOG control program: _____

63. Number of Food Service Establishments (FSEs) in service area: _____

64. Number of FSEs subject to FOG ordinance: _____

65. Provide more details about the FOG control program in the table below:

FOG Source Control Program Details		
Element	**Y/N**	**Comment**
FSE Permits		
FSE Inspections		
FSE Enforcement		
Oil & Grease Discharge Concentration Limit		
Grease Removal Device (GRD) Requirements:		
Traps		
Interceptors		
Automatic cleaning traps		
FSEs Subject to GRD Installation:		
All FSEs (new and existing)		
New FSEs		
Remodeled FSEs		
For Cause at Existing FSEs		
GRD Maintenance Requirements:		
Cleaning Frequency		
Kitchen BMP Requirements (list required BMPs below)		
Allowance for Chemical Additives?		
Allowance for Biological Additives?		
FOG Disposal Requirements		
FOG Disposal Manifest System		

66. List out the staff positions (FTE) dedicated to the FOG Program:
    Inspectors: _____
    Permit writers: _____
    Administrative: _____
    Other (describe): _____

67. FSE inspection frequency (years to inspect all FSEs): _____

68. Annual number of FSE inspections: _____

69. Does Utility use CCTV to identify FOG sources? (Y/N) _____

70. Does sewer maintenance staff coordinate with FOG source control program staff? (Y/N) ___

71. Is cleaning targeted to FOG hot spots? _____

72. Do maintenance crew workers refer FSEs to the FOG program? _____

73. Are pipe repairs targeted at FOG hot spots? _____

74. Describe program for public outreach and education related to residential FOG sources:
_____
_____
_____

75. Provide an electronic copy of the Utility's FOG program plans and procedures.

Pipe Inspection and Condition Assessment

Gravity Main Inspection

76. Describe gravity main pipe inspected in the last ten years and planned to be inspected in the next 10 years in the following table:

Gravity Main Inspections				
Date Range	Inspection Method	Miles of Pipe (without repeats)	Useable Condition Assessment	
			Miles of Pipe (without repeats)	% of System
2006 to present	CCTV			
2006 to present	Other			
Present to 2026	CCTV			
Present to 2026	Other			

77. Does the Utility inspect force main pipe? (Y/N) ___ If yes, describe all methods used to inspect force main pipe: _____
_____

78. Please provide a summary of the condition inspection findings to date: _____
_____
_____
_____

Private Laterals

79. Does the Utility require testing, repair, or replacement of private laterals when a sale, remodel, or other triggering event occurs? (Y/N) ____ If yes, provide an electronic copy of the ordinance and describe how you implement the program: _____
_____
_____

80. Number of private laterals inspected 2006 to present: _____

81. Please provide a summary of general findings from private lateral inspections: _____
_____

82. Number of private laterals planned for inspection present to 2026: _____

Capacity Assurance

83. Provide a list of the dates and locations where a spill was caused by a lack of capacity:

84. Provide a list of locations of known capacity bottlenecks:

85. Describe all inflow and infiltration assessments completed and include dates, area covered, findings, etc.:

Infrastructure Renewal and Capital Improvements

86. Provide information about pipes rehabilitated or replaced in the last ten years in the following table:

Planned and actual total miles of rehabilitation and replacement work		
Date Range	Miles of Pipe	% of System
2006 to present		
Present to 2026		
Planned and actual miles of rehabilitation and replacement work to control I/I		
2006 to present		
Present to 2026		

87. Describe your capacity improvement program: _____

_____

_____

_____

Pump Stations

88. Provide details about each pump station in the Collection System in the following table:

Pump # or Name	Street Address Location	Capacity	In Service (Y/N)	Failure, Overflow, Bypass, or Back since 1/1/2011? (Y/N)